2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEM

Jan 29, 2005 08:00 AM DOCUMENT # L03000020242 **Secretary of State** 1. Entity Name CENTURY 21 BUSINESS CENTER LLC Principal Place of Business Mailing Address 198 CENTURY 21 DRIVE PO BOX 61391 JACKSONVILLE, FL 32216 JACKSONVILLE, FL 32236-1391 CR2E083 (10/03) 01242005 No Chq-LLC DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 16-1668730 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent HARTWIG, KENNETH S DO NOT WRITE 7892 KNOLL DRIVE N. JACKSONVILLE, FL 32221 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Filing Fee is \$50.00 Due by May 1, 2005 MANAGING MEMBERS/MANAGERS 9. TITLE MGRM U00000203996 01/29/05-80052-016 50.00 NAME HARTWIG, KENNETH S 7892 KNOLL DRIVE N. STREET ADDRESS. CITY-ST-ZIP JACKSONVILLE, FL 32221 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ACCORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

FILED